~~~ ( CARCIAN & OF M. 20%) (14/07)

Case 09-41886

## United \$11/04/09 Bentered 11/04/09 15:14:24 Court

Desc Main

Northern

District Of

Illinois

| In re EBONI | Nebor  |
|-------------|--------|
|             | Debtor |

Case No. 09 - 41886

Chapter

## APPLICATION TO PAY FILING FEE IN INSTALLMENTS

|                                                      |                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                   | " THE PARTY OF THE |                                                                                                    |
|------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| 1.                                                   | In accordance with Fed. R. Bankr. P. 1006, I                                                                                                                                                                                                                                                                                                                                                         | apply for permission to pay the filing fee ar                                                                                                                                                                                     | nounting to \$ 299°°                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | in installments.                                                                                   |
| 2.                                                   | I am unable to pay the filing fee except in installments.                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                    |
| 3.                                                   | Until the filing fee is paid in full, I will not make any additional payment or transfer any additional property to an attorney or any other person services in connection with this case.                                                                                                                                                                                                           |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                    |
| 4. I propose the following terms for the payment     |                                                                                                                                                                                                                                                                                                                                                                                                      | it of the Filing Fee.*                                                                                                                                                                                                            | FILE BUILDING                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                    |
|                                                      | \$ <b>\$5 74.75</b> 75.00 Check one                                                                                                                                                                                                                                                                                                                                                                  | On or before                                                                                                                                                                                                                      | UNITED STATEL JANKRI<br>NORTHERN DISTRICT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | IDTOV AAUET                                                                                        |
|                                                      | s 74.75 on or before                                                                                                                                                                                                                                                                                                                                                                                 | 12-15-09                                                                                                                                                                                                                          | NOV 042                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 009                                                                                                |
|                                                      | \$74.75 on or before                                                                                                                                                                                                                                                                                                                                                                                 | 1-15-2010                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ED OLFOR                                                                                           |
|                                                      | \$ 74.56 RS on or before                                                                                                                                                                                                                                                                                                                                                                             | 2-15-2010                                                                                                                                                                                                                         | PS REP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | AJ                                                                                                 |
| *                                                    | The number of installments proposed shall no petition. For cause shown, the court may exte the petition. Fed. R. Bankr, P. 1006(b)(2).                                                                                                                                                                                                                                                               | t exceed four (4) and the final insertion of                                                                                                                                                                                      | 11.1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                    |
| 5.                                                   | I understand that if I fail to pay any installmen                                                                                                                                                                                                                                                                                                                                                    | it when due, my bankruptcy case may be dis                                                                                                                                                                                        | missed and I may not receive a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | dioahana a Cara III                                                                                |
|                                                      |                                                                                                                                                                                                                                                                                                                                                                                                      | 2 Arry                                                                                                                                                                                                                            | Massed and I may not receive a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | discharge of my debts.                                                                             |
| Signate                                              | ure of Attorney Date                                                                                                                                                                                                                                                                                                                                                                                 | Signature of Del                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 11/3/0/<br>Date                                                                                    |
| NI.                                                  |                                                                                                                                                                                                                                                                                                                                                                                                      | (In a joint case,                                                                                                                                                                                                                 | both spouses must sign.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                    |
| Name                                                 | of Attorney                                                                                                                                                                                                                                                                                                                                                                                          | G.                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                    |
|                                                      |                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                   | nt Debtor (if any)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Date                                                                                               |
| rules or have gi under the Printed If the be person, | are under penalty of perjury that: (1) I am a banking provided the debtor with a copy of this documer guidelines have been promulgated pursuant to 11 years the debtor notice of the maximum amount before at section; and (4) I will not accept any additional of Typed Name and Title, if any, of Bankruptcy Penalty petition preparer is not an individual, stoor partner who signs the document. | uptcy petition preparer as defined in 11 U.S. nt and the notices and information required u U.S.C. § 110(h) setting a maximum fee for some preparing any document for filing for a d I money or other property from the debtor be | C. § 110; (2) I prepared this document of the condensation of the  | cument for compensation h), and 342(b); (3) if try petition preparers, I the debtor, as required . |
| Address                                              |                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                    |
| Address                                              |                                                                                                                                                                                                                                                                                                                                                                                                      | •                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                    |
| x<br>Signatur                                        | on North Son With<br>e of Bankruptcy Petition Preparer                                                                                                                                                                                                                                                                                                                                               | <i>)</i><br>                                                                                                                                                                                                                      | 11/3/09<br>Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | •                                                                                                  |
|                                                      |                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                    |

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

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## United States Bankruptcy Court Northern District Of Illinois

| In re          | Debtor,                                   | Case No. 69-41886                                                                                                                 |
|----------------|-------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|
|                |                                           | Chapter                                                                                                                           |
|                | ORDER APPROVING PAYME                     | NT OF FILING FEE IN INSTALLMENTS                                                                                                  |
| application    |                                           | by the filing fee in installments on the terms proposed in the foregoing                                                          |
|                | IT IS ORDERED that the debtor(s) shall pe | sy the filing fee according to the following terms:                                                                               |
| \$             | Check one                                 | With the filing of the petition, or On or before                                                                                  |
| \$             | on or before                              |                                                                                                                                   |
| \$             | on or before                              |                                                                                                                                   |
| \$             | on or before                              |                                                                                                                                   |
|                | IT IS FURTHER OPPERED.                    | iling fee is paid in full the debtor(s) shall not make any additional may other person for services in connection with this case. |
|                |                                           | BY THE COURT                                                                                                                      |
| <b>NOV 0 4</b> | 2009                                      | KENNETH S. GARDNER<br>Clerk, U.S. Bankruptcy Court                                                                                |
|                |                                           | United States Bankruptcy Judge                                                                                                    |
|                |                                           |                                                                                                                                   |